## Combined Declaration For Patent And Power of Attorney

ATTORNEY'S DOCKET NUMBER

(includes Reference to PCT international Applications)

**P** 

Ref. 22388

As a below named inventor, I hereby declare that:

METHOD FOR	THE RECOMBINANT EXP	PRESSION OF AN N-TE	RMINAL FRAGMENT
OF HEPATOCY	TE GROWTH FACTOR		
he specification of v	which (check only one item below):	•	
is attached	d hereto	•	
was filed	as United States application		
Serial No	•	·	
on			
and was a			
on		(if applicable).	
	as DCT international application		
	as PCT international application PCT/EP2005/002176		•
Number	March 2, 2005		<u></u>
on			
and was	amended under PCT Article 19		•
, on		(if applicable).	
I acknowledge the accordance with Title I hereby claim foreignatent or inventor's than the United State	have reviewed and understand the by any amendment referred to above duty to disclose information while 37, Code of Federal Regulations. Ign priority benefits under Title 35, certificate or of any PCT internates of America listed below and have cate or any PCT international appearing filed by me on the same subject claimed:	ich is material to the patentabili §1.56(a).  United States Code, §119 of any ational application(s) designating at least or objection(s) at least or	foreign application in at least one country other application(s) for patent ne country other than the
United States of Am of which priority is			
United States of Am of which priority is			
United States of Am of which priority is  OREIGN/PCT APPLICATION	CATION(S) AND ANY PRIORITY CLA		BRIORITY CLAIMED
United States of Am of which priority is  OREIGN/PCT APPLICATION COUNTRY	CATION(S) AND ANY PRIORITY CLA APPLICATION NUMBER	DATE OF FILING (day month year)	PRIORITY CLAIMED UNDER 35 USC 119
United States of Am of which priority is  OREIGN/PCT APPLIC  COUNTRY (if PCT indicate PCT)		DATE OF FILING	UNDER 35 USC 119  X YES NO
United States of Am of which priority is OREIGN/PCT APPLICATION	APPLICATION NUMBER	DATE OF FILING (day month year)	VNDER 35 USC 119  X YES NO
United States of Am of which priority is  OREIGN/PCT APPLIC  COUNTRY (if PCT indicate PCT)	APPLICATION NUMBER	DATE OF FILING (day month year)	UNDER 35 USC 119  X YES NO

Combined Declaration For Patent Application and Power of Attorney (Continued) (includes Reference to PCT International Applications)

ATTORNEYS DOOKET HUMBER Ref. 22388

I hereby claim the benefit under Title 35, United States Code. §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112. I acknowledge the duty to disclose material information as defined in Title 37. Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

	J.S.C. 120:			NAL APPLICATIONS DESIGNA	<del></del>	STATUS (Check one	
	<del></del>		PLICATIONS				
	U.S. APPLICATION	NUMBER		U.S. FRLING DATE	PATENTED	PENDING	ABANDONE
<u> </u>			<u> </u>				
		PCT APPLICATIONS	DESIGNATING TH	HE U.S.			
				U.S. SERIAL NUMBERS			
PCT AP	PLICATION NO.	РСТ	FILING DATE	ASSIGNED (if any)			
/EP2005	5/002176	02/March/	2005				
			•				
				nereby appoint the following atto			<u> </u>
					•		
d Corresp	ondence to:					phone Calls to:	
d Corresp	ondence to:	George W. Jo	hnston, Esq.			ephone Calls to: ephone number)	
d Corresp	ondence to:	Hoffmann-La	Roche Inc.		(name and tel	ert P. Ho	
d Corresp	ondence to:	Hoffmann-La l 340 Kingsland	Roche Inc.		(name and tel	sphone number)	
FULL, NAM	IE   FAMILY NAME	Hoffmann-La	Roche Inc.	FIRST GIVEN NAME	(name and tel	ert P. Ho	
	IE   FAMILY NAME	Hoffmann-La l 340 Kingsland	Roche Inc.	Johannes	Robe (973	ert P. Ho 3) 235-44	
FULL, NAM	FAMILY NAME AUET	Hoffmann-La I 340 Kingsland Nutley, New J	Roche Inc.	Johannes STATE OR FOREIGN COUNTRY	R O D C ( 9 7 3	ert P. Ho 3) 235-44 NAME	
FULL NAM OF INVENT	FAMILY NAME AUET  AUET  D-8244	Hoffmann-La I 340 Kingsland Nutley, New J	Roche Inc.	Johannes	R o b e  ( 9 7 3	ert P. Ho 3) 235-44 NAME	
FULL NAM OF INVENTO RESIDENCE CITIZENSH POST OFFI ADDRESS	FAMILY NAME AUET  EA CITY  D-8244  CE POSTOFFICE  Angers	Hoffmann-La I 340 Kingsland Nutley, New J	Roche Inc.	Johannes  STATE OF FOREIGN COUNTRY  Germany  CITY  D-82445 Schwaigen	R o b e ( 9 7 3  SECOND GIVE  COUNTRY OF  Germany  STATE 6 ZIP O	ert P. Ho by 235-42  NAME  CITIZENSHIP  ODE; COUNTRY	
FULL NAM OF INVENT	FAMILY NAME AUET  E & CITY  IP D-8244  CE POSTOFFICE  AUGETS  AUGETS	Hoffmann-La l 340 Kingsland Nutley, New J Schwaigen ADDRESS Trasse 7	Roche Inc.	Johannes  STATE OF FOREIGN COUNTRY  Germany  CITY  D-82445 Schwaigen  FIRST GIVEN NAME	R o b e ( 9 7 3 second give Country of Germany State 6 Zip c	ert P. Ho by 235-42  NAME  CITIZENSHIP  ODE; COUNTRY	
FULL NAM OF INVENTE RESIDENCE CITIZENSH POST OFFI ADDRESS FULL NAM OF INVENTE	FAMILY NAME AUET  E & CITY  IP D-8244  CE POSTOFFICE ANGERS  ANGERS  Papadia  E & CITY	Hoffmann-La la 340 Kingsland Nutley, New Joness Trasse 7	Roche Inc.	Johannes  STATE OR FOREIGN COUNTRY  Germany  CITY  D-82445 Schwaigen  FIRST GIVEN NAME  Apohlon  STATE OR FOREIGN COUNTRY	R o b e ( 9 7 3  SECOND GIVE  COUNTRY OF  Germany  STATE 6 ZIP O	ert P. Ho by citizenship ode; country	
FULL NAM OF INVENTO RESIDENCE CITIZENSH POST OFFI ADDRESS FULL NAM OF INVENTO RESIDENCE CITIZENSH	FAMILY NAME AUET  E & CITY D-8244  CE POSTOFFICE ANGETS  ANGETS  Papadia  E & CITY D-8367	Hoffmann-La la 340 Kingsland Nutley, New Joness Trasse 7 mitriou  Bichl	Roche Inc.	Johannes  STATE OF FOREIGN COUNTRY  Germany  CITY  D-82445 Schwaigen  FIRST GIVEN NAME  Apollon  STATE OF FOREIGN COUNTRY  Germany	COUNTRY OF Germany SECOND GIVE	ert P. H(3) 235-44 NAME CITIZENSHIP NAME CITIZENSHIP NAME CITIZENSHIP	
FULL NAM OF INVENTE RESIDENCE CITIZENSH POST OFFI ADDRESS FULL NAM OF INVENTE	FAMILY NAME AUET  E & CITY IP D-8244.  CE POSTOFFICE S PAPADILY NAME Papadia  E & CITY D-8367.  CE POSTOFFICE S POSTOFFICE	Hoffmann-La la 340 Kingsland Nutley, New Joness Trasse 7 mitriou  Bichl	Roche Inc.	Johannes  STATE OR FOREIGN COUNTRY  Germany  CITY  D-82445 Schwaigen  FIRST GIVEN NAME  Apohlon  STATE OR FOREIGN COUNTRY	COUNTRY OF Germany SECOND GIVE	ert P. Ho by country y n name citizenship y n name citizenship y n name citizenship	
FULL NAM OF INVENTO RESIDENCE CITIZENSH POST OFFI ADDRESS FULL NAM OF INVENTO RESIDENCE CITIZENSH	FAMILY NAME AUET  E & CITY IP D-8244  CE POSTOFFICE S Angers APAGE PAPAGI  E & CITY D-8367  CE POSTOFFICE Bachst	Hoffmann-La la 340 Kingsland Nutley, New Joness Trasse 7 mitriou  Bichl ADDRESS crasse 38a	Roche Inc.	Johannes state of foreign country Germany city D-82445 Schwaigen First given name Apollon state of foreign country Germany city D-83673 Bichl First given name	R O D C ( 9 7 3 SECOND GIVE STATE 6 ZIP C COUNTRY OF Germany STATE 6 ZIP C	Phone number)  TEP. H(  TEP. H	
FULL NAM OF INVENTO RESIDENCE CITIZENSH  POST OFFI ADDRESS  FULL NAM OF INVENTO RESIDENCE CITIZENSH  POST OFFI ADDRESS  FULL NAM OF INVENTO RESIDENCE CITIZENSH  FULL NAM OF INVENTO	FAMILY NAME AUET  BA CITY  D-8244  CE POSTOFFICE ANGETS  ANGETS  Papadia  E & CITY  D-8367  CE POSTOFFICE Bachsta	Hoffmann-La la 340 Kingsland Nutley, New Joness Trasse 7 mitriou  Bichl ADDRESS crasse 38a	Roche Inc.	Johannes  STATE OR FOREIGN COUNTRY  Germany  D-82445 Schwaigen  FIRST GIVEN NAME  Apohlon  STATE OR FOREIGN COUNTRY  Germany  CITY  D-83673 Bichl	COUNTRY OF  COUNTRY OF  Germany  SECOND GIVE  COUNTRY OF  Germany  SECOND GIVE  COUNTRY OF  Germany  STATE 6 ZIP COUNTRY OF  Germany  STATE 6 ZIP COUNTRY OF  Germany  STATE 6 ZIP COUNTRY OF	Phone number)  TEP. H(  TEP. H	
FULL NAM OF INVENTO RESIDENCE CITIZENSH POST OFFI ADDRESS FULL NAM OF INVENTO RESIDENCE CITIZENSH POST OFFI ADDRESS	FAMILY NAME AUET  E & CITY D-8244  GE POSTOFFICE ANGETS  ANGETS  Papadia  FAMILY NAME Papadia  FAMILY NAME Papadia  E & CITY D-8367  GE POSTOFFICE Bachsta	Hoffmann-La la 340 Kingsland Nutley, New Joness Trasse 7  Mitriou  Bichl  ADDRESS  Trasse 38a	Roche Inc.	Johannes  STATE OR FOREIGN COUNTRY  Germany  D-82445 Schwaigen  FIRST GIVEN NAME  Apoblon  STATE OR FOREIGN COUNTRY  Germany  CITY  D-83673 Bichl  FIRST GIVEN NAME  Christian  STATE OR FOREIGN COUNTRY  Germany	RODE (973 SECOND GIVE COUNTRY OF GETTIANT SECOND GIVE COUNTRY OF GETTIANT STATE 6 ZIP C CETTIANT SECOND GIVE COUNTRY OF GETTIANT SECOND GIVE COUNTRY OF GETTIANT	ert P. Ho ert P.	
FULL NAM OF INVENTO RESIDENCE CITIZENSH POST OFFI ADDRESS  FULL NAM OF INVENTO RESIDENCE CITIZENSH POST OFFI ADDRESS  FULL NAM OF INVENTO RESIDENCE CITIZENSH FULL NAM OF INVENTO	FAMILY NAME AUET  E & CITY D-8244  CE POSTOFFICE ANGERS  ANGERS  PAMILY NAME Papadia  E & CITY D-8367  CE POSTOFFICE Bachsta	Hoffmann-La la 340 Kingsland Nutley, New Joness Trasse 7  Mitriou  Bichl  ADDRESS  Trasse 38a	Roche Inc.	Johannes  STATE OR FOREIGN COUNTRY  Germany  D-82445 Schwaigen  FIRST GIVEN NAME  Apoblon  STATE OR FOREIGN COUNTRY  Germany  City  D-83673 Bichl  FIRST GIVEN NAME  Christian  STATE OR FOREIGN COUNTRY	RODE (973 SECOND GIVE COUNTRY OF GETTIANT SECOND GIVE COUNTRY OF GETTIANT STATE 6 ZIP C CETTIANT SECOND GIVE COUNTRY OF GETTIANT SECOND GIVE COUNTRY OF GETTIANT	ert P. H(3) 235-44  N NAME  CITIZENSHIP  VODE; COUNTRY  VODE; COUNTRY  VODE; COUNTRY  VODE; COUNTRY  VODE; COUNTRY	

02/August/2006

02/August/2006

SIGNATURE OF INTENTOR 201

02/August/2006

## UNITED STATES PATENT AND TRADEMARK OFFICE

Combined Declaration For Patent and Power of	Attorney (Continued)	ATTORNEYS DOCKET NUMBER
(includes Reference to PCT international Applications)		Ref. 22388

FIII	LL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
OFIN	NVENTOR	Seeber	Stefan	
RESI	SIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
2   απ	IZENSHIP	D-82377 Penzberg	Germany	Germany
POS	ST OFFICE DDRESS	POST OFFICE ADDRESS	СПУ	STATE 6 ZIP CODE; COUNTRY
~	JUNESS	Breunetsrieder Weg 22	D-82377 Penzberg	Germany
FUL OF IN	LL NAME INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
ρ RESI	SIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
POS	ST OFFICE DDRESS	POST OFFICE ADDRESS	CITY	STATE 6 ZIP CODE; COUNTRY
FUI OF II	ILL NAME INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	SIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
POS AC	ST OFFICE DORESS	POST OFFICE ADDRESS	СПҮ	STATE 6 ZIP CODE; COUNTRY
FUI OF II	ILL NAME INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
<b>~  </b> απ	SIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
POS	OST OFFICE DDRESS	POST OFFICE ADDRESS	СПУ	STATE 6 ZIP CODE; COUNTRY
FU OF I	JLL NAME INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
RES OZ	SIDENCE & TIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
PO	OST OFFICE ADDRESS	POST OFFICE ADDRESS	СПУ	STATE 6 ZIP CODE; COUNTRY
FU	ULL NAME INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
හ   cm	SIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
0 P0	OST OFFICE	POST OFFICE ADDRESS	CITY	STATE 6 ZIP CODE; COUNTRY

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF TRIVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206
02/August/2006	DATE	DATE

SIGNATURE OF INVENTOR 207	SIGNATURE OF INVENTOR 208	SIGNATURE OF INVENTOR 209	· · · · · · · · · · · · · · · · · · ·
DATE	DATE	DATE	